

Form (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
RECEIVED

NOV 15 2006

Change in Company's premium or rate level produced by SPRINGFIELD, ILLINOIS
revision effective 04/01/2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$202,195 | -3.4% |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Refer to ISO circular page included with filing

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): ISO Filing # ML-2006-RLA1

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
 result from application of new rates.

American Alternative Insurance Corporation
Name of Company

Stephen J. Corbett - Vice President
Official - Title

H29219D

INS00106

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective 12/01/2006 for new business and 2/1/2007 for renewals

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$42,512,573 | +7.1 |
| 14. Crop Hail | | |
| 15. Other | | |

Does filing only apply to certain territory (territories) or certain classes? No

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Rate revision for our Businessowners Policy (BOP) in Illinois resulting in an overall average change of +7.1%.

* Written Premium - Adjusted to reflect all prior rate changes (Use calendar year-end premium from Premium Accounting Summary of QOR)

**Change in Company's premium level which will result from application of new rates.

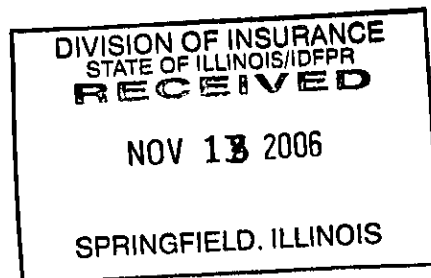
AMERICAN FAMILY MUTUAL INS. CO.

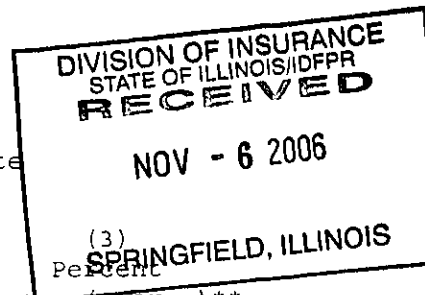
Name of Company

Christa Adler

Competitive Pricing Research Analyst

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 02/01/2007

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$410,207 | -3.4% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing Independent PMF's.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

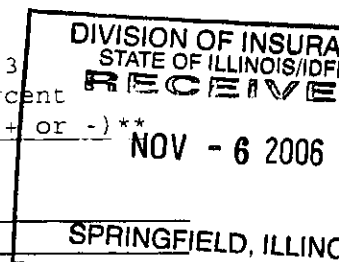
Citizens Insurance Company of America
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 02/01/2007

| (1) <u>Coverage</u> | (2) Annual Premium <u>Volume (Illinois)*</u> | (3) Percent <u>Change (+ or -)**</u> |
|-------------------------------|--|--|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$77,400 | -3.1% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |



Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing Independent PMF's.

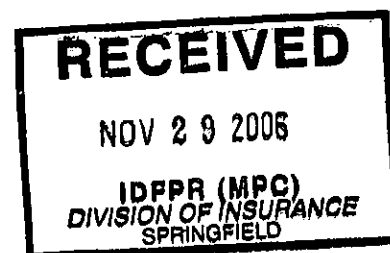
* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Citizens Insurance Company of Illinois
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective July 1, 2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$465,656 | -8.4% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

We are revising our loss cost multiplier and adopting ISO loss costs (ISO File #CF-2006-RLA1).
Our File #CP IL0069302R02.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

CUMIS Insurance Society, Inc.
Name of Company

Leonard Daniels - Vice President, Credit Union Protection Operations
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 3/1/2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 1,921,055 | 0.0% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adding new rates

*Adjusted to reflect all prior rate changes.

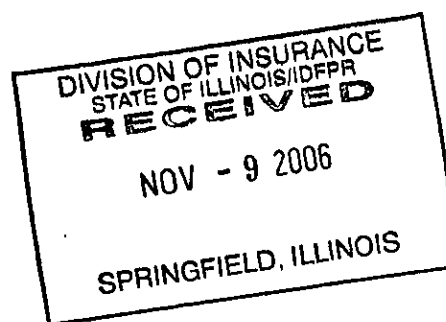
**Change in Company's premium level which will result from application of new rates.

Farmland Mutual Insurance Company

Name of Company

Brad Leggett Vice President of Underwriting

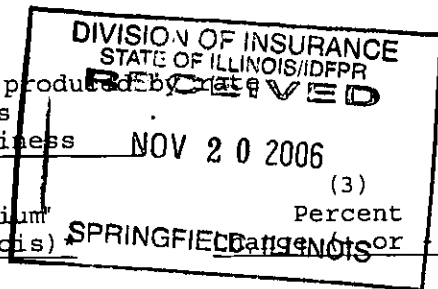
Official - Title



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by
revision effective 02/01/2007-New Business
04/01/2007-Renewal Business



| (1) <u>Coverage</u> | (2) Annual Premium Volume (Illinois) | (3) Percent Change or ** |
|-------------------------------|--|--------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 2,455,044 | -9.7% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Filing applies to all classes except schools

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are revising our PMF's (Package Modification Factors) in all companies, for all classes except schools.

PMF's will be uniformly decreased by 10.6% to achieve a rate level effect of -10.0% on our non-school book of business. The effect for total CPP, including schools, is -9.5. School PMF's are not changing with this filing.

* Adjusted to reflect all prior rate changes.

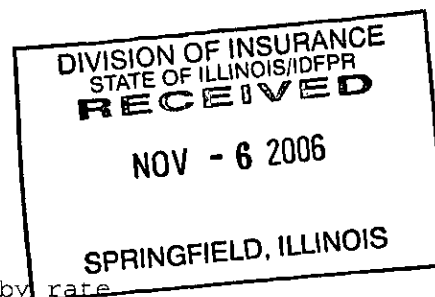
** Change in Company's premium level which will result from application of new rates.

Graphic Arts Mutual Insurance Company
Name of Company

George T. Dodd, Vice President/Actuary
Official - Title

H29219D

INS00106



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 02/01/2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$1,359,725 | -4.1% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing Independent PMF's.

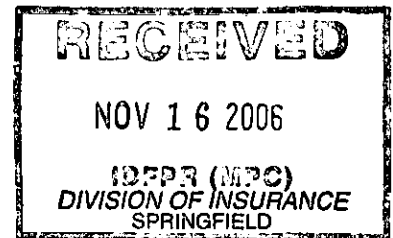
- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Hanover Insurance Company
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision effective 05/01/07

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 428,413 | 6.2% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Delayed adoption of ISO Commercial Package Policy filing #ML-2006-RLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

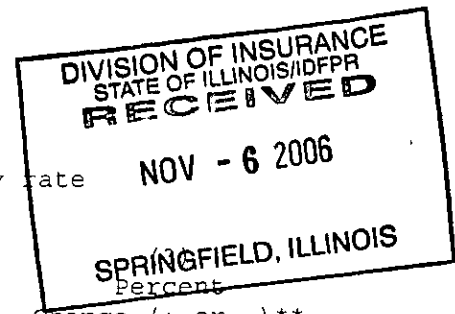
Harco National Insurance Company
Name of Company

Jim Breitbach - Compliance
Technical Specialist
Official - Title

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 02/01/2007



| (1) | (2) | |
|-------------------------------|--------------------------------------|------------------------------|
| Coverage | Annual Premium Volume (Illinois)* | Percent Change (+ or -)** |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$4,039,992 | -3.5% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing Independent PMF's.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Massachusetts Bay Insurance Company
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 3/1/2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 2,481,871 | 0.0% |
| 14. Crop Hail | | |
| 15. Other _____ | | |
| Line of Insurance | | |

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No.

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adding new rates

*Adjusted to reflect all prior rate changes.

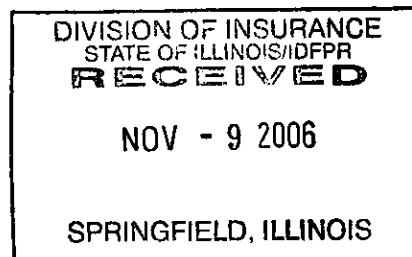
**Change in Company's premium level which will result from application of new rates.

Nationwide Agribusiness Insurance Company

Name of Company

Brad Liggett Vice President of Underwriting

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective March 1, 2007

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|-------------------------------------|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 1,592,501 | -20.7% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NoBrief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting ISO reference filing CF-2006-RLA1.

*Adjusted to reflect all prior rate changes.

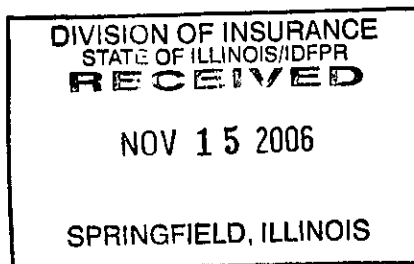
**Change in Company's premium level which will result from application of new rates.

Navigators Insurance Company

Name of Company

Valerie Brink, Compliance Analyst

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-1-2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---------------------------------|---|---|
| 1. Automobile Liability Private | | |
| Passenger Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$908,011 | 0% |
| 14. Crop Hail | | |
| 15. Other _____ | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting AAIS Commercial Properties rate and rule program revision.

*Adjusted to reflect all prior rate changes.

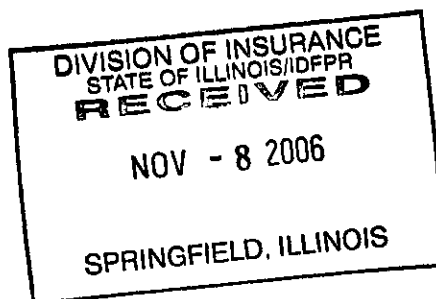
**Change in Company's premium level which will result from application of new rates.

Pharmacists Mutual Insurance Company

Name of Company

Thomas E. Claude - Regional Vice President

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1-1-2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | \$1,880,319 | 0% |
| 14. Crop Hail | | |
| 15. Other _____ | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

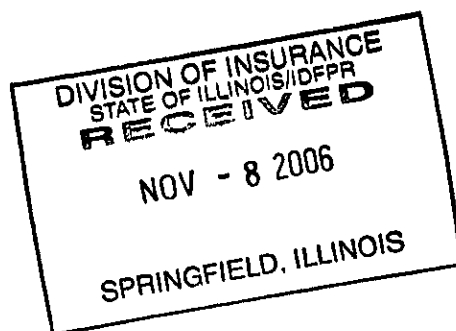
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting AAIS Businessowners rate and rule program revision.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Pharmacists Mutual Insurance Company
Name of Company

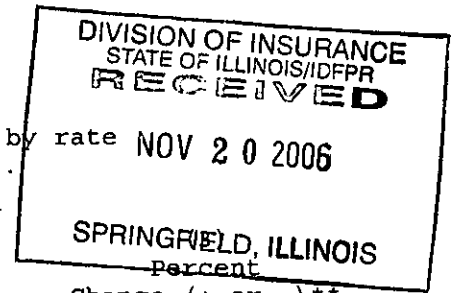
Thomas E. Claude - Regional Vice President
Official - Title



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
 revision effective 02/01/2007-New Business
 04/01/2007-Renewal Business



| (1) Coverage | (2) Annual Premium Volume (Illinois)* | Percent Change (+ or -)** |
|-------------------------------|---|------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 695,134 | -9.4% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
 If so, specify: Filing applies to all classes except schools

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are revising our PMF's (Package Modification Factors) in all companies, for all classes except schools.

PMF's will be uniformly decreased by 10.6% to achieve a rate level effect of -10.0% on our non-school book of business. The effect for total CPP, including schools, is -9.5. School PMF's are not changing with this filing.

* Adjusted to reflect all prior rate changes.

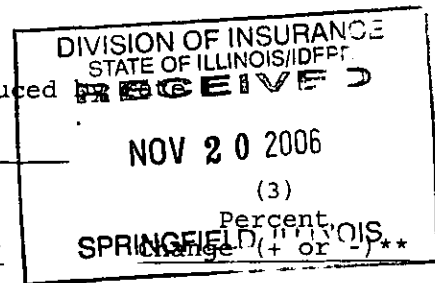
** Change in Company's premium level which will result from application of new rates.

Republic-Franklin Insurance Company
 Name of Company

George T. Dodd, Vice President/Actuary
 Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced
 revision effective 02/01/2007-New Business
 04/01/2007-Renewal Business



| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | 1,254,942 | -9.3% |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
 If so, specify: Filing applies to all classes except schools and financial institutions

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are revising our PMF's (Package Modification Factors) in all companies, for all classes except schools and financial institutions. PMF's will be uniformly decreased by 10.6% to achieve a rate level effect of -10.0% on our non-school book of business. The effect for total CPP, including schools, is -9.5. School PMF's are not changing with this filing.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Utica Mutual Insurance Company
 Name of Company

George T. Dodd, Vice President/Actuary
 Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effective

5/1/2007

| (1) <u>Coverage</u> | (2) <u>Annual Premium</u> <u>Volume (Illinois)*</u> | (3) <u>Percent</u> <u>Change (+ or -)</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril - Businessowners | \$775,057 Westport | -7.7% |
| | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify :

No

Brief description of filing . (If filing follows rates of an advisory organization, specify organization):

Filing to adopt ISO Businessowners Loss Costs

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Westport Insurance Corporation,Name of companyLinda Snook, P&RS SpecialistOfficial-Title